PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

indicated unless correct maintenance fee notifica	ted below or directed oth	nerwise in Block 1, by (a) specifying a new corr	espondence add	ress; and/or (b) indicating a sepa	correspondence address as a rate "FEE ADDRESS" for
CURRENT CORRESPONE	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
300 S. WACKE 32ND FLOOR			St ad	ereby certify that tes Postal Servi dressed to the	at this Fee(s) ce with suffic Mail Stop IS	cient postage for firs	mission g deposited with the United st class mail in an envelope above, or being facsimile ate indicated below.
CHICAGO, IL	60606						(Depositor's name)
							(Signature)
			<u></u>				(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	R	ATTOR	NEY DOCKET NO	CONFIRMATION NO.
09/898,234 TITLE OF INVENTION	07/03/2001 N: TNF RECEPTORS, TI	NF BINDING PROTEIN	Rudolf Hauptmann S AND DNAS CODING	FOR THEM		98,385-1	5009
APPLN TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID I	SSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0		\$1700	09/05/2007
EXAMINER		ART UNIT	CLASS-SUBCLASS				
O HARA, EILEEN B		1646	435-069100				
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			(1) the names of up or agents OR, alterna (2) the name of a sin registered attorney or	a single firm (having as a member a aney or agent) and the names of up to ent attorneys or agents. If no name is			
			data will appear on the T a substitute for filing a (B) RESIDENCE: (CIT	patent. If an as assignment. Y and STATE C	R COUNTR		ocument has been filed for
Amgen 3	Inc.		Thousand	Oaks, (2 A		
		categories (will not be p	rinted on the patent):	Individual 🛭	Corporation	or other private gro	oup entity Government
4a. The following fee(s) Issue Fee	are submitted:	Bb. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 13-2490 (enclose an extra copy of this form).					
a. Applicant clain	ntus (from status indicated ns SMALL ENTITY statu	is. See 37 CFR 1.27.	b. Applicant is no lo	-			
NOTE: The Issue Fee an interest as shown by the	nd Publication Fee (if requee records of the United Sta	uired) will not be accepte tes Patent and Trademark	d from anyone other than Office.	the applicant; a	registered att	orney or agent; or th	ne assignee or other party in
Authorized Signature		L Juha Jr.		Date		2007 48,710	
an application. Confider submitting the complete this form and/or suggest Box 1450, Alexandria, V Alexandria, Virginia 22.	ntiality is governed by 35 and application form to the Lions for reducing this but Virginia 22313-1450. DC	U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the NOT SEND FEES OR	1.14. This collection is e depending upon the induce Chief Information Offi COMPLETED FORMS	stimated to take vidual case. An cer, U.S. Patent O THIS ADDR	12 minutes to y comments and Tradema ESS. SEND	o complete, including the amount of the amount of the control of t	by the USPTO to process) gg gathering, preparing, and ne you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,